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United States
Department of
Agriculture

Animal and
Plant Health
Inspection
Service

Policy and Program
Development

Environmental and
Risk Analysis
Services, Unit 149
4700 River Road
Riverdale, MD
20737

ENQL 7-1 CY12
PERMANENT
Retire 04/17

April 30, 2012

Document Processing Desk [6(a)(2)]
Office of Pesticide Programs (7504P)
Ariel Rios Building
U.S. Environmental Protection Agency
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460-0001

ATTN: Mr. Norman Spurling (7502P)

SUBJECT: **FIFRA, Section 6(a)(2) quarterly report: aggregate adverse effect incidents dated December 2011, January 2012, and February 2012 for the reporting period ending April 30, 2012**

During this reporting period, the following APHIS-registered pesticide product was involved in an adverse incident:

EPA Reg. No. 56228-15
Active Ingredient:
Sodium Cyanide

M-44 Cyanide Capsules
CAS No. 143-33-9

Incident Category
D-A

No. of Incidents
1

Details of the incident (involving the death of a domestic animal) can be found in the enclosure.

Please direct any questions pertaining to this adverse incident report to Ann Nasr at (301) 851-3099 or e-mail ann.m.nasr@aphis.usda.gov.

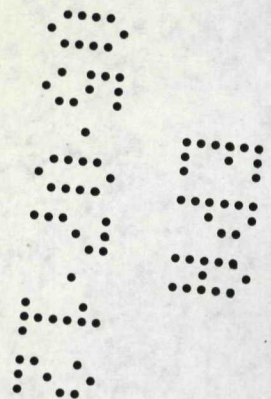
Sincerely,

Maria T. Boroja
Acting Chief, Environmental and Risk Analysis Services

Enclosure



Safeguarding American Agriculture
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U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
WILDLIFE SERVICES

6(a)(2) ADVERSE EFFECTS INCIDENT INFORMATION REPORT

INCIDENT CODE D-A	INCIDENT STATUS		DATE WS BECAME AWARE OF THE INCIDENT 2-25-12	ES USE ONLY REPORT NUMBER
	Date <input checked="" type="checkbox"/> New 2-25-12	Date of last submission <input type="checkbox"/> Update		
EMPLOYEE NAME (To contact for additional information) Dwayne Milliron		TELEPHONE NUMBER 575-355-7585	CONTACT NAME (If Non-APHIS) TELEPHONE NUMBER	
DUTY STATION ADDRESS 422 HayPatch Dr. Fort Sumner, N.M. 88119			ADDRESS	
INCIDENT LOCATION			SOURCE OF INFORMATION	
CITY Fort Sumner	STATE N.M.	COUNTY De Baca	<input checked="" type="checkbox"/> Self <input type="checkbox"/> Telephone Call <input type="checkbox"/> Letter <input type="checkbox"/> Media <input type="checkbox"/> Oral Report <input type="checkbox"/> Other	
EXPOSURE TYPE (Examples include spill, splash, drift, runoff or other.)				

INCIDENT SITE (examples include commercial or residential sites, forest/woods, agricultural (specify crop), rangeland/pasture, noncrop area, fallow field, public lands (specify), recreational area (specify), right-of-way (rail, utility, highway))

Rangeland

SITUATION RELATING TO PRODUCT ADVERSE INCIDENT: (examples include application, mixing/loading, reentry, during transport, repair/maintenance of application equipment, during manufacturing/formulation)

incidental pull of M-44

EPA REGISTRATION NUMBER 56228-15	PRODUCT NAME M-44 cyanide capsules	ACTIVE INGREDIENT Sodium Cyanide	
WAS THE PRODUCT <input type="checkbox"/> Concentrated <input checked="" type="checkbox"/> Diluted	WHAT WAS THE DILUTION RATIO (if applicable) 91.06% active, 8.94% inert ingred.	WERE THE LABEL DIRECTIONS FOLLOWED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WAS THE APPLICATOR CERTIFIED (if applicable) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
IS THERE EVIDENCE OF INTENTIONAL MISUSE (If "Yes", explain) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

SUMMARY OF THE INCIDENT (Attach supplemental form if needed)

Feral dog pulled an M-44 capsule. Rancher was contacted and reported he was not missing any dogs. Dog may have been lost on Highway 60, about 2 miles from the incident

RECEIVED

APR 27 2012

WS-80

NAME OF PREPARER Dwayne Milliron	SIGNATURE Dwayne Milliron	TELEPHONE NUMBER 575-355-7585	DATE 3-19-12
NAME OF SUPERVISOR BRIAN V. ARCHULETA	SIGNATURE Brian V Archuleta	TELEPHONE NUMBER 575-623-3310	DATE 4/12/12

Personal privacy information

DOMESTIC ANIMAL, FAUNA, OR FLORA INCIDENT - SUPPLEMENTAL REPORT FORM	ES USE ONLY
	REPORT NUMBER

"X" ONE <input type="checkbox"/> Amphibian <input type="checkbox"/> Fish <input type="checkbox"/> Bird <input checked="" type="checkbox"/> Mammal <input type="checkbox"/> Invertebrate <input type="checkbox"/> Reptile <input type="checkbox"/> Plant	"X" ONE <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Wild	NUMBER OR ACRES AFFECTED <i>N/A</i>
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SPECIES COMMON NAME <i>Dog</i>	BREED (if known) <i>Mixed Breed</i>
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DESCRIBE SIGNS, SYMPTOMS, ADVERSE EFFECTS

Death

IF LABORATORY TESTS WERE PERFORMED, LIST NAME OF TEST(S) AND RESULTS (if available, attach copies):

N/A

MAGNITUDE OF THE EFFECT (e.g., miles of streams, square area of terrestrial habitat)

N/A

PESTICIDE APPLICATION RATE AND METHOD OF APPLICATION (Include brief description of baiting if applicable)

M-44 sodium Cyanide capsule

WAS PREBATING USED ON THE SITE (Describe)

☐ Yes ☒ No

DESCRIPTION OF THE HABITAT AND CIRCUMSTANCES UNDER WHICH THE INCIDENT OCCURRED

Rangeland - dog pulled an M-44 capsule

ADDITIONAL FACTORS

NAME OF PREPARER <i>Wayne Milliron</i>	SIGNATURE <i>Wayne Milliron</i>	DATE <i>3-19-12</i>
NAME OF SUPERVISOR <i>Brian V. Archuleta</i>	SIGNATURE <i>Brian V. Archuleta</i>	DATE <i>4/12/12</i>